FILED

## UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS

DEC 11 2018 UP

NORTHERN DISTRICT OF ILLINOIS

AMENDED THOMAS G. BRUTON CLERK, U.S. DISTRICT COURT IN FORMA PAUPERIS APPLICATION

AND FINANCIAL AFFIDAVIT

	aring Cuautle.			
Plaintif	ff	Case Number: _	18-CU-06	995
v. Holl Defend	lywood Casino Joliet.  Jant(s). a/K/a HC Joliet, LLC	Judge: <u>Charl</u>	es P. Kororo	as
"not ap box app additio	ctions: Please answer every question. Do not oplicable (N/A)," write that response. Where plies. If you need more space to answer a question by page that refers to each such question by ation. Please print or type your answers.	ever a box is includuestion or to explain	ded, place a ✓ in wh in your answer, attac	ichever
peti above- prepay declare the reli	ration: I, Marina Coulte  itioner movant (other ment of fees, or in support of my motion that I am unable to pay the costs of these paief sought in the complaint/petition/motion/lowing questions under penalty of perjury.	application to procon for appointment proceedings, and I	eed without full of counsel, or believe that I am ent	he both. I itled to
1.	Are you currently incarcerated?		☐ Yes (If "No" go to q	No uestion 2.)
	ID #: Nam Do you receive any payment from the inst Monthly amount: \( \begin{align*} \beta \\ \A \\ \end{align*}	e of prison or jail: itution?	N/A □ Yes	□No
2.	Are you currently employed?  A. If the answer is "yes," state your:  Monthly salary or wages:  Name and address of employer:  Unoka, 11 60447	,200,- KEA 501 Inte	Yes	□ No
	B. If the answer is "no," state your: Beginning and ending dates of last Last monthly salary or wages:	N/A		
	Name and address of employer:	N/A		
3.	Are you married? If the answer is "yes", is your spouse curre	ently employed?	✓ Yes	□ No □ No

[If you need additional space for ANY section, please attach an additional sheet and reference that section.]

	Spouse's Monthly salary or wages: Name and address of employer: \(\int \) / A		
4.	In addition to your income stated above in response to Question 2 (where repeat here), have you or anyone else living at the same residence recompanies with the past twelve months from any of the following sources? Place "Yes" or "No" in each of the categories A through G, check all boxe category, and fill in the twelve-month total in each category.	ceived more thace a ✓ next t	nan To
	A.   Salary or   wages  Total received in the last 12 months:   Received by:	l Yes I	□ No
	B. □ Business, □ profession or □ other self-employment  Total received in the last 12 months:  Received by:	l Yes I	≥ No
	C. □ Rental income, □ interest or □ dividends  Total received in the last 12 months:  Received by:	l Yes I	⊉ No
	D. □ Pensions, □ social security, □ annuities, □ life insurance, □ disability, □ workers' compensation, □ alimony or maintenance or □ child support Total received in the last 12 months: Received by:	l Yes	No
	E. □ Gifts or □ inheritances  Total received in the last 12 months:  Received by:	] Yes	₽ No
	F. Unemployment, welfare, or any other public assistance  Total received in the last 12 months: \$200 food Stamps, \$6, Received by:	Yes 845.00 from fund + medi	□ No n Hardest Hit cal benefits
	G. D'Any other sources (describe source: other legal Settlement Total received in the last 12 months: 12,000.00  Received by: my self	Yes	□ No
5.	Do you or anyone else living at the same residence have more than \$200 in cash or checking or savings accounts?  Total amount:		₽ No

6.	bo you or anyone else liv stocks, bonds, securities of Property: N/A	or other financial	nstruments?	□ Yes	No
	In whose name held:	N/A	Relationship to y	you: N	A
7.	Do you or anyone else live mortgage)? Real estate in cooperative, two-flat, etc. Type of property and add Current value: \$\\\ 22\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ress: 1711 Pra 1969 00 what the property Mine gage or loan payn	Equity: \$ 16  Relationship to the control of the co	partment, cond Yes 1. +, 11 604 2, 728.5 ount you owe you:	lominium,  No SS (Equity on it.)
8.	Do you or anyone else live market value of more that Year, make and model:  Current value: \$24, the difference between we Amount of monthly loan In whose name held:  Name of person making person mak	n \$1000? 2018 リャリハリ 472, 12 hat the automobil payments: 女 2 8	DAI ELANTRA Equity: \$ 4,1 e is worth and the among 3.71 He Relationship to	✓ Yes  O O O  ount you owe	CEquity is on it.)
9.	Do you or anyone else live or other items of personal Property:  Current value:  is the difference between Amount of monthly loan In whose name held:  Name of person making person making person making personal	/ A what the property payments:	current market value of the Equity:  Equity: is worth and the amount of the equity.	of more than S □ Yes □ \( \begin{align*} al	\$1000? No(Equity
10.	List the persons who live relationship to each person support or the specific mucheck here: None.	on and state wheth	ner you are entirely re-	sponsible for	the person's
11.	List the persons who do not your relationship to each support. If none, check here are a support. As	person and state lere:   None.	now much you contrib	oute monthly	

I declare under penalty of perjury that the above information is true and correct. I understand that 28 U.S.C. § 1915(e)(2)(A) states that the court shall dismiss this case at any time if the Date: 12/11/2018 Morrier Cuauth

Signature of Applicant NOTICE TO PRISONERS: In addition to the Certificate below, a prisoner must also attach a print-out from the institution(s) where he or she has been in custody during the last six months showing all receipts, expenditures and balances in the prisoner's prison or jail trust fund accounts during that period. Because the law requires information as to such accounts covering a full six months before you have filed your lawsuit, you must attach a sheet covering transactions in your own account - prepared by each institution where you have been in custody during that six-month period. As already stated, you must also have the Certificate below completed by an authorized officer at each institution. **CERTIFICATE** (Incarcerated applicants only) (To be completed by the institution of incarceration) I certify that the applicant named herein, \_\_\_\_\_\_\_, I.D.#\_\_\_\_\_\_\_, has the sum of \$ \_\_\_\_\_\_ on account to his/her credit at (name of institution) . I further certify that the applicant has the following securities to his/her credit: \_\_\_\_\_\_. I further certify that during the past six months the applicant's average monthly deposit was \$ \_\_\_\_\_. (Add all deposits from all \_\_\_\_\_. (Add all deposits from all sources and then divide by number of months). Signature of Authorized Officer Date (Print Name)